PE 0 1 2003 J

1647 AF

FEE TRANSMITTAL for FY 2004		Use in lieu of PTO/SB/17 (08-03) (Form updated to reflect FY 2004 fees effective 10/1/03)							
PADEMA			Complete if Known						
FEE TRANSMITTAL	-	Application Number				09/345,373-Conf. #1167			
for TV 0004			Filing Date			Steven M. Ruben			
tor FY 2004			First Named Inventor			Joachim R. Gruber			
Effective 10/01/2003, Patent fees are subject to annual revision.			Examiner Name			C Saoud			
Applicant claims small entity status. See 37 CFR 1.27		A - A I I I - i A				1647		<del>/}</del> ~	
		Art Unit Attorney Docket No.				DE45501	<del></del>	<u> </u>	
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Attom	ey Doo	cket No	).	PF 155C 1		<u> </u>	
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (co	ntinued)	360	
Check Credit Money Order Other None  X Deposit Account:	3. /	ADDITIO	ONAL	FEES			ntinued)	ENTER	
Deposit		e Entity		Entity	_			1/6	
Account Number 08-3425	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Desc	ription	Fee Paid	
Deposit	1051		2054						
Account Name Human Genome Sciences, Inc.	1051	130	2051	65	_	- late filing fee		_——	
The Director is authorized to: (check all that apply)	1052	50	2052	25	sheet.	– iale provisio	nal filing fee or cove	`	
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Englis	h specificatior	ı	-	
Charge any additional fee(s) during the pendency of this	1812	2,520	1812	2 520	_	Ī	arte reexamination		
application	1	·		·	_	publication o		<del></del>	
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Examiner a	ction			
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting Examiner a	publication o ection	t SIR atter		
FEE CALCULATION	1251	110	2251	55		or reply within	first month		
. BASIC FILING FEE	1252	420	2252	210	Extension f	or reply within	second month		
arge Entity Small Entity	1253	950	2253	475	Extension f	or reply within	third month		
Fee Fee Fee Fee Fee <u>Fee Description</u> Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension f	or reply within	fourth month		
001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension f	or reply within	i fifth month		
002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A	ppeal		,	
003 530 2003 265 Plant filing fee	1402		2402		_	ef in support o	f an appeal		
1004 770 2004 385 Reissue filing fee	1403		2403		•	r oral hearing		<b></b>	
1005 160 2005 80 Provisional filing fee	1451 1452	•	1451 2452	1,510 55		•	lic use proceeding	<b> </b>	
<b>SUBTOTAL (1)</b> (\$) 0.00	1452		2452	665		o revive – unavoidable			
D. EVEDA OLAHA CECC FOR HELLEY AND DEICCHE	1501	·	2501	665		e fee (or reissu			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1502		2502	240	Design issu	`	,		
otal Claims 12 -152** = 0 x = =	1502		2502	320	Plant issue			<b> </b>	
	1460		1460	130		the Commiss	sioner		
Claims 2 13 = 0 x	1807		1807	50		fee under 37			
Multiple Dependent=					_		. "		
_arge Entity   Small Entity   Fee   Fee	1806		1806	180			n Disclosure Stmt ssignment per		
Code (\$) Fee Description	8021	1 40	8021	40	property (ti	mes number o	of properties)		
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a sub (37 CFR 1.		final rejection		
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each a	dditional inver			
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1801		2801	385		(37CFR 1.129 r Continued F	(b)) xamination (RCE)		
over original patent	1802			900	•	r expedited ex	, ,	<del></del>	
1205 18 2205 9 ** Reissue claims in excess of 20			1802	900		application		<u> </u>	
and over original patent		r fee (spe	•						
SUBTOTAL (2) (\$) 0.00	*Red	duced by	Basic Fi	iling Fee	Paid	SUBTO	TAL (3) (\$)	0.00	
**or number previously paid, if greater; For Reissues, see above									
SUBMITTED BY	Posit	etration M	. 17	<u> </u>		<del>1                                    </del>	(if applicable))		
Name (Print/Type), Michele M. Wales		tration No. A3,975				Telephone	elephone (301) 610-5772		
Signature		100				Date	December 1, 2	2003	
	/L A	, V							

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